



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	<input checked="" type="checkbox"/> Declaration Submitted With Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Attorney Docket Number 36287-03801		
	First Named Inventor SPIELER et al.		
	COMPLETE IF KNOWN		
	Application Number		10/644,281
	Filing Date		August 20, 2003
Group Art Unit		3624	
Examiner Name		TBA	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR MANAGER ENHANCED RETURN ON COLLATERALIZED DEBT OBLIGATION TRANSACTIONS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 3]

The collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NY2:4517822

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number 27171 OR ☒ Correspondence address below
or Bar Code Label

Name Chris L. Holm
Milbank, Tweed, Hadley & McCloy LLP

Address 1 Chase Manhattan Plaza

City New York State NY ZIP 10005-1413

Country USA Telephone (212) 530-5000 Fax (212) 530-5219

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name Christian Family Name SPIELER
(first and middle (if any)) or Surname

Inventor's Signature  Date 4th November 2003

Residence: City FRANKFURT State HESSEN Country GERMANY Citizenship GERMAN

Mailing Address BRIAND RING 26

City FRANKFURT State HESSEN Zip 60598 Country GERMANY

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name Jonathan Family Name SLATER
(first and middle (if any)) or Surname

Inventor's Signature Date

Residence: City State Country Citizenship

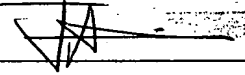
Mailing Address

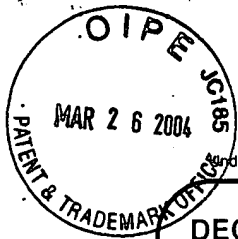
City State Zip Country

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Christian		Family Name or Surname SPIELER	
Inventor's Signature				Date	
Residence: City		State	Country	Citizenship	
Mailing Address					
City		State		Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Jonathan		Family Name or Surname SLATER	
Inventor's Signature <i>J.R. Slater</i>				Date 4 NOVEMBER 2003	
Residence: City		State	ENGLAND	BRITISH	
Mailing Address		17 ANHALT RD.			
City	LONDON	State		Zip	ENGLAND

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Brigitta		WALISCH	
Inventor's Signature		Date	
Residence: City		State	Country
			Citizenship
Mailing Address			
City		State	Country
		Zip	
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jonathan		ADAMS	
Inventor's Signature		Date	
		16 / 3 / 04	
Residence: City		State	Country
		USA	US
Mailing Address			
City		State	Country
		Zip	USA



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Address 1 Chase Manhattan Plaza			
City New York	State NY	ZIP 10005-1413	
Country USA	Telephone (212) 530-5000	Fax (212) 530-5219	
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Christian (first and middle [if any])		Family Name SPIELER or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jonathan (first and middle [if any])		Family Name SLATER or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Brigitta		WALISCH	
Inventor's Signature		Date	
<i>B. USA</i>		10-11-03	
Residence: City	State	Country	Citizenship
London	UK	UK	German
Mailing Address			
33 Savile Row			
City	State	Zip	Country
London		W15 3PZ	UK
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jonathan		ADAMS	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
		USA	US
Mailing Address			
City	State	Zip	Country
			USA

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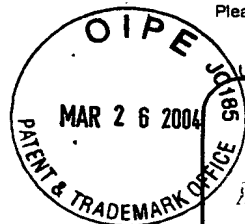


PTO/SB/81 (8-03)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/644,281
Filing Date	August 20, 2003
First Named Inventor	SPIELER, et al.
Group Art Unit	3624
Examiner Name	TBA
Attorney Docket Number	36287-03801

I hereby appoint:

☐ Practitioners at Customer Number **27171**

OR

☒ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number
Christopher E. Chalsen	30,938	Claire A. Gilmartin	51,735
Robert J. Koch	28,637	Jay I. Alexander	32,678
Michael M. Murray	32,537	Robert W. Busby, Jr.	40,930
Errol B. Taylor	39,853	John J. Yim	47,197
Frederick M. Zullo	32,452	Einar Stole	47,272
John M. Griem	40,005	Christopher M. Guest	48,515
Lawrence T. Kass	40,671	Jennifer L. Overly	51,197
James R. Klaiber	41,902	Lisa Coward	44,091
Chris L. Holm	39,227	Kimberly N. Van Voorhis	48,009
Christopher J. Gaspar	41,030	Marc D. Peters	46,988
Frank A. Bruno	46,583		

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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☐ The above-mentioned Customer Number.

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☐ The address associated with Customer Number:

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OR

<input type="checkbox"/> Firm or Individual Name	Milbank, Tweed Hadley & McCloy LLP				
Address					
Address					
1 Chase Mahattan Plaza					
City	New York	State	NY	ZIP	10005-1314
Country					
United States					
Telephone	(212) 530-5000		Fax	(212) 530-5219	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

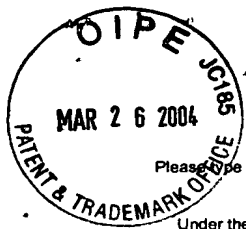
Name	Christian Spieker
Signature	
Date	4 th of November 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 4 forms are submitted.

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Christopher J. Gaspar	41,030	Marc D. Peters	48,988
Frank A. Bruno	48,583		

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Address

Address 1 Chase Mahattan Plaza

City

New York

State

NY

ZIP

10005-1314

Country

United States

Telephone

(212) 530-5000

Fax

(212) 530-5219

I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Jonathan Slater

Signature

J. Slater

Date

4 NOVEMBER 2003

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City

New York

State

NY

ZIP

10005-1314

Country

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SIGNATURE of Applicant or Assignee of Record

Name

Jonathan Adams

Signature

Date

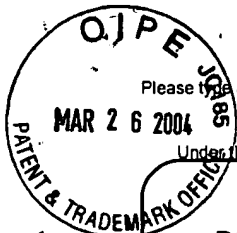
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Name

Birgitta Walisch

Signature

B. Walisch

Date

10 - Nov - 03

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